Fill	in this informa	ation to identify yo	our case:					
Deb	otor 1	Niyah Smith	-Walker			Checl	k if this is:	
					_		An amended filing	
	otor 2 ouse, if filing)	Sheldon L. V	Valker					ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF PENNS	YLVANIA	1	MM / DD / YYYY	
	se number 18	8-13616						
0	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/15
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par 1.	t 1: Desc	ribe Your House	hold					
١.	□ No. Go to							
	_		in a separ	ate household?				
	- 1 00. ⊒ 0							
	-	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter			■ Yes
								□ No □ Yes
					_			□ No
								☐ Yes
								□ No
2	Do your ov	nancas inaluda	_					☐ Yes
3.		penses include of people other t	han	No				
	yourself an	d your depende	nts? □	Yes				
Par	t 2: Estim	nate Your Ongoi	ng Monthi	ly Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance it cluded it on Schedule I:)			Your exp	enses
,		,						
4.		or home owners and any rent for th		ses for your residence. In or lot.	nclude first mortgage	e 4. \$		1,067.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associa		upkeep expenses		4c. \$		0.00
5.				dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00

8. Child 9. Cloth 10. Perss 11. Medi 12. Trans Do no 13. Ente 14. Char 15. Insur Do no 15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	6a. \$ _ 6b. \$ _	500.00 50.00					
6a. 6b. 6c. 6d. 7. Food 8. Child 9. Cloth 10. Perse 11. Medi 12. Trans Do no 15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	6b. \$						
6b. 6c. 6d. 7. Food 8. Child 9. Cloth 10. Perse 11. Medi 12. Trans Do no 15a. 15b. 15c. 15d. 15c. 15d. 17a. 17a. 17b. 17c.	Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	6b. \$						
6d. 7. Food 8. Child 9. Cloth 10. Perse 11. Medi 12. Trans Do no 13. Entel 14. Char 15. Insur Do no 15a. 15b. 15c. 15d. 15c. 15d. 17a. 17a. 17b. 17c.	Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	0- 0-	ວບ.ບບ					
6d. 7. Food 8. Child 9. Cloth 10. Perse 11. Medi 12. Trans Do no 13. Entel 14. Char 15a. 15b. 15c. 15d. 15c. 15d. 17a. 17a. 17b. 17c.	Other. Specify:	6c. \$	250.00					
7. Food 8. Child 9. Cloth 10. Perse 11. Medi 12. Trans Do ne 13. Entel 14. Char 15a. 15b. 15c. 15d. 15c. 15d. 17a. 17a. 17b. 17c.		6d. \$	0.00					
8. Child 9. Cloth 10. Pers 11. Medi 12. Trans Do no 13. Ente 14. Char 15a. 15b. 15c. 15d. 17a. 17a. 17b. 17c.	d and housekeeping supplies	7. \$	815.00					
9. Cloth 10. Perso 11. Medi 12. Trans Do no 13. Entel 14. Char 15a. 15b. 15c. 15d. 15d. 17a. 17a. 17b. 17c.	dcare and children's education costs	8. \$	0.00					
10. Person Medi 12. Trans Do no 13. Enter 14. Char 15a. 15b. 15c. 15d. 17a. 17a. 17b. 17c.	ning, laundry, and dry cleaning	9. \$	200.00					
11. Medi 12. Trans Do no 13. Ente 14. Char 15. Insur Do no 15a. 15b. 15c. 15d. 17a. 17a. 17b. 17c.	onal care products and services	10. \$	125.00					
12. Trans Do no 13. Enter 14. Char 15. Insur Do no 15a. 15b. 15c. 15d. 15d. Taxe Spec 17. Insta 17a. 17b. 17c.	ical and dental expenses	11. \$	45.00					
Do no	sportation. Include gas, maintenance, bus or train fare.	π. Ψ _	43.00					
13. Enter 14. Char 15. Insur 15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	ot include car payments.	12. \$	250.00					
14. Char 15. Insur Do no 15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	rtainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00					
15. Insur Do no 15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	itable contributions and religious donations	14. \$	0.00					
Do no 15a. 15b. 15c. 15d. 15d. Taxe Spec 17. Insta 17a. 17b. 17c.	•	ι Ψ _	0.00					
15a. 15b. 15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	ot include insurance deducted from your pay or included in lines 4 or 20.							
15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	Life insurance	15a. \$	0.00					
15c. 15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	Health insurance	15b. \$	0.00					
15d. 16. Taxe Spec 17. Insta 17a. 17b. 17c.	Vehicle insurance	15c. \$	241.32					
16. Taxe Spec 17. Insta 17a. 17b. 17c.	Other insurance. Specify:	15d. \$	0.00					
Spec 17. Insta 17a. 17b. 17c.	ss. Do not include taxes deducted from your pay or included in lines 4 or 20.	ισα. ψ _	0.00					
17a. 17b. 17c.	ify:	16. \$ _	0.00					
17b. 17c.	Illment or lease payments: Car payments for Vehicle 1	17a. \$	479.00					
17c.	Car payments for Vehicle 2	17b. \$						
	• •	· <u> </u>	0.00					
170	Other. Specify:	17c. \$ _	0.00					
	Other. Specify:	17d. \$ _	0.00					
	payments of alimony, maintenance, and support that you did not report		0.00					
	icted from your pay on line 5, Schedule I, Your Income (Official Form 100	οι). ^{10. ψ} _						
Spec	r payments you make to support others who do not live with you.	Ψ _ 19.	0.00					
	er real property expenses not included in lines 4 or 5 of this form or on S		como					
	Mortgages on other property	20a. \$	0.00					
	Real estate taxes	20b. \$ _						
		· _	0.00					
	Property, homeowner's, or renter's insurance	20c. \$ _	0.00					
	Maintenance, repair, and upkeep expenses	20d. \$	0.00					
	Homeowner's association or condominium dues	20e. \$	0.00					
21. Othe	r: Specify:	21. +\$	0.00					
	ulate your monthly expenses							
	Add lines 4 through 21.	\$	4,022.32					
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J	-2 \$						
22c. /	Add line 22a and 22b. The result is your monthly expenses.	\$	4,022.32					
23. Calcı	ulate your monthly net income.							
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,891.23					
23b.	Copy your monthly expenses from line 22c above.	23b\$	4,022.32					
23c.	Subtract your monthly expenses from your monthly income.	23c. \$	868.91					
	The result is your monthly net income.							
For ex	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
■ No								
\	0.							